

Representative Shelley Berkley
Application for Congressional Nomination
to the United States Service Academies

Attach a picture here

Full Name:			
Telephone Number: ()_		Social Security Number:	
Permanent Address:			
City:	State: _	Zip:	-
Mailing Address (if different fi	rom above):		
City:	State:	Zip:	-
Date of Birth:	Place of Birth	(City/County/State):	
High School		Graduation Date	
Address of High School			
Father's Name	Mo	ther's Name	
Parent's Address (if different fr	rom above)		
Grade Point Average	Class Rank _	of	
Test Scores:			
SAT Verbal	SAT Math AC	CT English ACT Math	-
ACT Reading	_ ACT Sci. Reasoning _	ACT Composite	
Academy Selection:	Air Force	☐ Naval	
(Number in order of preference)	Merchant Marines	s	
I am also seeking a nominati	on through:		

## Berkley Academy Application Page 2

Extracurricular Activities: (Attach an additional sheet if necessary)			
Other activities, hobbies, etc.:			

## Page 3 Please explain why you wish to attend a United States Service Academy (Use additional sheet if necessary) I verify that I am a legal resident of Nevada's First Congressional District

Berkley Academy Application

Please return this application to Representative Shelley Berkley 2340 Paseo Del Prado, Ste. D-106

Signature \_\_\_\_\_ Date \_\_\_\_\_